

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 06/30/02

2 Serial/Patent # 09/64623

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/> Filing				\$
<input type="checkbox"/> Amendment				\$
<input checked="" type="checkbox"/> Extension of Time		12	5/31/2	\$ 80.0
<input type="checkbox"/> Notice of Appeal/Appeal		1		\$
<input type="checkbox"/> Petition				\$
<input type="checkbox"/> Issue				\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$
<input type="checkbox"/> Maintenance				\$
<input type="checkbox"/> Assignment				\$
<input type="checkbox"/> Other				\$
		7 TOTAL AMOUNT OF REFUND	\$	
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
<input type="checkbox"/> Overpayment		<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
<input checked="" type="checkbox"/> Duplicate Payment		9	11--1410	
<input checked="" type="checkbox"/> No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Cheryl Golden Baker</u>		TITLE: <u>Paralegal</u>		
SIGNATURE: <u>Cheryl Golden Baker</u>		PHONE: _____		
OFFICE: <u>Patents</u>		*****		
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: <u>Debra Bell</u>		DATE: <u>6/30/02</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: